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PILOT STUDY TO DETERMINE THE INCIDENCE OF SUBSTANCE USE AT DELIVERY IN NORTH CAROLINA TERTIARY CENTERS

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ABSTRACT

Substance use by pregnant women, and research documenting its adverse perinatal effects, have increased substantially in recent years. Possible effects of prenatal exposure to cocaine in the fetus include: spontaneous abortion, premature labor, abruptio placentae, cerebral infarction, and stillbirth. Although effects of prenatal exposure to marijuana are less certain, a possible adverse outcome is decreased birthweight.

Cocaine has become increasingly available to a wide range of potential users, and its use in the United States has increased dramatically in the past decade. Few studies, however, have been conducted to determine the actual incidence of substance use among pregnant women. Of the studies undertaken, the majority indicate cocaine use in urban and predominately low-income populations.

The North Carolina Division of Maternal and Child Health and the Center for Health and Environmental Statistics conducted a study to examine approporiate procedures for collecting data of substance use during pregnancy and to determine the incidence of cocaine, marijuana, and alcohol use around the time of delivery in North Carolina tertiary centers. Results of this study indicate that 1.3 percent of the women presenting to deliver at the tertiary centers included in the study showed evidence of recent cocaine use, and 1.7 percent tested positive for recent marijuana use. Women testing positive for cocaine use were primarily nonwhite, from urban counties, and on Medicaid or uninsured. No significant differences in socio-demographic characteristics were observed in those testing positive for marijuana use.

Caution is suggested in the use of estimates of drug use around delivery to measure the magnitude of the drug problem in pregnant women.